



NPDES #1300 Oily Discharge General Permit
Discharge Monitoring Report

POPSF
11.3.18.1
V3

Submit report monthly by 15th
of following month to:
Oregon DEQ

Name: Kinder Morgan Energy Partners, LP

Site/File ID #: Linnton/32300

Common Name: Kinder Morgan

County: Multnomah

Facility Location:

Month/Quarter/Year: July 2001

11400 NW St. Helens Rd.
Portland, Or. 97231

Monitoring for Oil/Water Separator

TANK 3034

Day	Oil and Grease (mg/L)	Visible Sheen	Ethanol and/or MBTE	Flow
	Frequency varies, see permit	Daily, visual observation	Quarterly grab sample, if present on site and in bulk	Daily estimate, when discharging
Limit	10 mg/L monthly, 15 mg/L daily max.	No visible sheen at any time	No limit	No limit
1				
2				
3				
4				
5				
6	N D			90.557
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				
26				
27				
28				
29				
30				
31				
Total				90.557 gms
Max.				
Average				292.1 gms

See Reverse Side for Additional Monitoring and Signature Block

USEPA SF



1288110

Stormwater Monitoring

Only for facilities required to have NPDES permits for stormwater, per 40 CFR 122.26
Monitoring required for each point identified in the Stormwater Pollution Control Plan

Day	Visible Sheen	Floating Solids (associated with industry)	Total Copper (mg/L)	Total Lead (mg/L)	Total Zinc (mg/L)	pH (S.U.)	Total Suspended Solids (mg/L)
	Daily when discharging, visual observation	Once per month when discharging	Twice per year, grab sample	Twice per year, grab sample	Twice per year, grab sample	Twice per year, grab sample	Twice per year, grab sample
Limit	No visible sheen	No visible discharge*	0.1 mg/L*	0.4 mg/L*	0.6 mg/L*	Within 6.0 to 9.0	130 mg/L*
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							
21							
22							
23							
24							
25							
26							
27							
28							
29							
30							
31							
Total							
Max.							
Average							

*These are benchmarks, not effluent limits. If benchmarks are exceeded, review/possible revision of Stormwater plan is required. See permit for more details.

Signature Requirement

I certify, under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

Signature of Responsible Official: _____

Name and Title (Please Print): Peter G. Murphy Area Manager Portland

Date of Signature: 8/3/07 Telephone: 503-220-1254



CERTIFICATE OF ANALYSIS

COPY

CLIENT: KINDER-MORGAN WILLBRIDGE
5880 N.W. ST. HELENS RD.
PORTLAND OR 97210

PHONE: (503) 220-1260
FAX: (503) 220-1270

DATE SUBMITTED: 07/05/2001

PROJECT NAME: LINNTON-T3034/NPDES 001 BATCH 01-04

CI SAMPLE	CLIENTS ID#	DATE	TIME	MATRIX	DESCRIPTION
11046-001	T-3034/B-01-04	07/05/2001	1000	Water	Wastewater

REPORT DATE: 07/06/2001

REPORT NUMBER: 11046

PAGE: 1 OF 1

SAMPLE	ANALYSIS	PARAMETER	RESULTS	UNITS	DETECTION LIMIT	ANALYST
Wastewater			SAMPLE ID: T-3034/B-01-04			
11046-001	O & G, TOTAL (HEM) EPA 1664	TOTAL OIL AND GREASE	24.2	mg/L	2	Gale S 07/05/2001

REVIEWED BY:

David Back - QA Manager



NON-COMMERCIAL BILL OF LADING

☐ 797 West Channel Street, San Pedro, CA 90731 Ph: (310) 833-1557 Fax: (310) 833-1585

Ph: (925) 229-0360 Fax: (925) 229-2821

Project Name: Linton T-3034
Project Number: NIDES 001
P.O. Number: Bach 01-04
Testing Priority Notification Method(s)
☐ Standard ☐ Telephone
☒ Rush ☒ FAX
Due Date: 7-6-01 ☒ Mail

[illegible]

Relinquished By:  7-501 1015	Received By: 	Date/Time 7/5/01 1115
Relinquished By:	Received By:	Date/Time

FOR LABORATORY USE ONLY

Inspection Job Number: _____ ☐ Visa

Laboratory Project Number: _____ ☐ Cash/Check # _____

Overtime authorized ☐ Yes ☐ No Amount Paid: \$ _____

All samples received in good condition ☐ Yes ☐ No Initials _____

EPA Method 1664 Process Worksheet

Rev. New

Analyst: SW

Date of analysis: 7-9-01

Date of extraction: 7-9-01

Sample ID	Flask #	pH < 2	Sample volume (mL)	Flask tare wt (g)	HEM + Flask wt (g)	HEM wt (g)	Total HEM (mg/Liter)	Flask #	Flask tare wt (g)	SGT-HEM + Flask wt (g)	Silica gel wt (g)	SGT-HEM wt (g)	Total HEM-SGT (mg/Liter)
11051-H	—	<input type="checkbox"/> Yes <input type="checkbox"/> No	750	86.3738	86.3717	70.9	(1.2) ND						
P 110501-1	162	<input type="checkbox"/> Yes <input type="checkbox"/> No	750	84.7771	85.0664	268.3571	(1.2) 162	84.7771	84.8882	9g		(93.9)	
		<input type="checkbox"/> Yes <input type="checkbox"/> No											
		<input type="checkbox"/> Yes <input type="checkbox"/> No											
		<input type="checkbox"/> Yes <input type="checkbox"/> No											
		<input type="checkbox"/> Yes <input type="checkbox"/> No											
		<input type="checkbox"/> Yes <input type="checkbox"/> No											
		<input type="checkbox"/> Yes <input type="checkbox"/> No											
		<input type="checkbox"/> Yes <input type="checkbox"/> No											
		<input type="checkbox"/> Yes <input type="checkbox"/> No											
		<input type="checkbox"/> Yes <input type="checkbox"/> No											

Method Blank

	Flask #	Flask tare wt (g)	HEM + Flask wt (g)	HEM residue wt (mg)	HEM (mg/L)	Silica gel wt (g)	Flask #	Flask tare wt (g)	SGT-HEM + Flask wt (g)	SGT Flask Tare Wt (g)	SGT-HEM residue wt (mg)	SGT Concentration
Method Blank	4	64.7037	64.7020	1.7 (ND)	3		4	64.7037	64.7020	-1.6	ND	

Spike/Matrix spike Duplicate

	Flask #	Flask tare wt (g)	HEM + flask wt (g)	HEM wt (mg)	% recovery	Silica gel wt (g)	Flask #	Flask tare wt (g)	SGT-HEM + Flask wt (g)	SGT Flask Tare Wt (g)	SGT-HEM wt (mg)	% recovery
Spike	L	87.1138	87.1507	369	92.25%	13	L	87.1138	87.1325	18.7	93.50%	100%
Matrix Spike Dup	2	82.065	82.1002	38.7	96.70%	13	2	82.065	82.0798	18.3	91.50%	100%

Comments:



COPY

CERTIFICATE OF ANALYSIS

July 11, 2001 QUALITY ASSURANCE REPORT : 11051

Page 1 of 1

Sample Description	Laboratory Number	Sample Matrix	Date Sampled
Linnton Tk-3034/ Batch 01-04	11051-001-01	Wastewater	07/06/01

ANALYTICAL NARRATIVE

All samples were extracted and analyzed within accepted EPA holding times. Some of the analyses were within established data quality objectives.

A Matrix Spike sample was spiked with 10 mLs of a standard which contained 200mg of hexadecane and of stearic acid. The "total O&G" spike was, therefore, 40 mg while the "nonpolar O&G" spike result should have represented the removal of the 20 mg stearic acid.

TOTAL AND NONPOLAR OIL & GREASE (EPA 1664 HEM/SGT)

<u>SAMPLE</u>	<u>DATE OF ANALYSIS</u>	<u>SPIKE</u>	<u>QC SAMPLE</u>	<u>QC RESULT</u>	<u>UNITS</u>	<u>REPORT LIMITS</u>	<u>REC (%)</u>	<u>RPD(%)</u>
Total Oil & Grease								
11051-001-1	07/09/01	---	ND	--	mg/L	DL, 2	----	----
Blank (ICB)	07/09/01	----	--	ND	mg/L	DL, 2	----	----
MS	07/09/01	40.0	--	36.9	mg	78-114	92.3	----
MS(Dup)	07/09/01	40.0	--	38.7	mg	78-114	96.8	4.8

EPA Method 1664 Process Worksheet

SOP 2.11
Rev. New

Analyst: 2/2/01

Date of analysis: 7-5-01

Date of extraction: 7-5-01

Sample ID	Flask #	pH < 2 <input type="checkbox"/> Yes <input type="checkbox"/> No	Sample volume (mL)	Flask tare wt (g)	HEM + Flask wt (g)	HEM wt (g)	Total HEM (mg/Liter)	Flask #	Flask tare wt (g)	SGT-HEM + Flask wt (g)	Silica gel wt (g)	SGT-HEM wt (g)	Total HEM-SGT (mg/Liter)
11046-110		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	770	84.486	84.505	18.6	24.2						
11041-12	-	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	980	80.01	80.023	5.6	5.7						
11041-221		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	780	74.502	74.5133	10.7	13.7						
11042-11	-	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	970	68.563	68.8724	16.1	16.6						
11042-21	T	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	980	70.679	70.6307	12.1	12.3						
11043-12	11	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	980	63.1163	63.032	6.9	7.0						
11043-22	15	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	980	62.7947	62.7946	2.9	3.0						
11043-32	16	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	980	67.6748	67.6786	3.8	3.9						
11048-11	K	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	890	92.302	92.2914	92.3023	4.1	4.6					
		<input type="checkbox"/> Yes <input type="checkbox"/> No											

Method Blank

	Flask #	Flask tare wt (g)	HEM + Flask wt (g)	HEM residue wt (mg)	HEM (mg/L)	Silica gel wt (g)	Flask #	Flask tare wt (g)	SGT-HEM + Flask wt (g)	SGT Flask Tare Wt (g)	SGT-HEM residue wt (mg)	SGT Concentration
Method Blank	63	89.8616	89.8628		1.2	ND						

Spike/Matrix spike Duplicate

	Flask #	Flask tare wt (g)	HEM + Flask wt (g)	HEM wt (mg)	% recovery	Silica gel wt (g)	Flask #	Flask tare wt (g)	SGT-HEM + Flask wt (g)	SGT Flask Tare Wt (g)	SGT-HEM wt (mg)	% recovery
Spike	W	90.9440	90.9852	4.17	103.0							
Matrix Spike Dup	1	79.3857	79.4203	4.70	0.6							

Comments:



CERTIFICATE OF ANALYSIS

30FY

July 11, 2001 QUALITY ASSURANCE REPORT : 11046

Page 1 of 1

Sample Description	Laboratory Number	Sample Matrix	Date Sampled
Linnton Tk-3034/ Batch 01-04	11046-001-01	Wastewater	07/05/01

ANALYTICAL NARRATIVE

All samples were extracted and analyzed within accepted EPA holdingtimes. Some of the analyses were within established data quality objectives.

A Matrix Spike sample was spiked with 10 mLs of a standard which contained 200mg of hexadecane and of stearic acid. The "total O&G" spike was, therefore, 40 mg while the "nonpolar O&G" spike result should have represented the removal of the 20 mg stearic acid.

TOTAL AND NONPOLAR OIL & GREASE (EPA 1664 HEM/SGT)

<u>SAMPLE</u>	<u>DATE OF ANALYSIS</u>	<u>SPIKE</u>	<u>QC SAMPLE</u>	<u>QC RESULT</u>	<u>UNITS</u>	<u>REPORT REC LIMITS</u>	<u>REC (%)</u>	<u>RPD(%)</u>
Total Oil & Grease								
11046-001-1	07/05/01	---	24.2	-	mg/L	DL, 2	----	---
Blank (ICB)	07/05/01	----	--	ND	mg/L	DL, 2	---	---
MS	07/05/01	40.0	--	41.2	mg	78-114	103.	----
MS(Dup)	07/05/01	40.0	--	34.8	mg	78-114	87.0	17.

**TANK 3034
DISCHARGE REPORT**

NPDES Permit No. 1300-J

*Kinder Morgan
Linnton Terminal
11400 NW St. Helens Road
Portland, Oregon 97231*

Batch No.: 01-04

Start of Discharge:

Date	Start Time	Beginning Gauge Reading Gallons	Person Starting Discharge
7/10/01	0800	92760	AB

End of Discharge:

Date	Ending Time	Ending Gauge Reading Gallons	Person Ending Discharge
7/10/01	1400	2203	ALB

Total Gallons Discharged = 90557



CERTIFICATE OF ANALYSIS

COPY

CLIENT: KINDER-MORGAN WILLBRIDGE
5880 N.W. ST. HELENS RD.
PORTLAND OR 97210

PHONE: (503) 220-1260
FAX: (503) 220-1270

DATE SUBMITTED: 07/06/2001

PROJECT NAME: LINTON T-3034, NPDES001, BATCH01-04

CI SAMPLE	CLIENTS ID#	DATE	TIME	MATRIX	DESCRIPTION
11051-001	T-3034	07/06/2001	0945	Water	T03034 WATER BATCH 01-04

REPORT DATE: 07/09/2001

REPORT NUMBER: 11051

PAGE: 1 OF 1

SAMPLE	ANALYSIS	PARAMETER	RESULTS	UNITS	DETECTION	
					LIMIT	ANALYST
T03034 WATER	BATCH 01-04	SAMPLE ID: T-3034				
11051-001	O & G, TOTAL (HEM) EPA 1664	TOTAL OIL AND GREASE	ND	mg/L	2	Gale S 07/09/2001

REVIEWED BY:

David Back - QA Manager

NON-COMMERCIAL BILL OF LADING

☐ 797 West Channel Street, San Pedro, CA 90731 Ph: (310) 833-1557 Fax: (310) 833-1585

Ph: (925) 229-0360 Fax: (925) 229-2821

Ph: (310) 833-1557 Fax: (310) 833-1585

Project Name Clinton T-303K
Project Number NPDET001
P.O. Number BATCH 01-04
Testing Priority Notification Method(s)
☐ Standard ☐ Telephone
☒ Rush ☒ FAX
Due Date _____ ☒ Mail

[illegible]

Relinquished By: <i>R. J. [Signature]</i> 10/15 7-6-01	Received By: <i>[Signature]</i>	Date/Time 10/15 7/6/01
Relinquished By:	Received By:	Date/Time

Inspection Job Number: _____ <input type="checkbox"/> Visa		<u>FOR LABORATORY USE ONLY</u>	
Laboratory Project Number: _____ <input type="checkbox"/> Cash/Check # _____			
Overtime authorized <input type="checkbox"/> Yes <input type="checkbox"/> No		Amount Paid: \$ _____	
All samples received in good condition <input type="checkbox"/> Yes <input type="checkbox"/> No		Initials _____	